



Health Insurance Coverage

in Maryland

THROUGH 2003



Stephen J. Salamon, Chairman

November 2004

LETTER FROM THE CHAIRMAN



MARYLAND
HEALTH CARE
COMMISSION

Access to health care insurance affects all residents of the state. Those without insurance are at greater risk should they fall ill and those with insurance pay more because the costs of uncom-

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pensated care are borne by us all. Together with the Maryland Insurance Administration, MHCC designs private insurance products for the small group insurance market and for individuals who have difficulty in obtaining insurance. So that policymakers and others interested in practical solutions have a common starting point for understanding the problems of the uninsured, Commission staff analyzes and publishes impartial and timely information on insurance coverage in the state.

Lack of insurance coverage is a complex problem. Employment, family income, age, and composition of the family and availability of affordable products play important roles. The MHCC is releasing this report at a time of renewed interest in expanding insurance coverage. The need for new options has grown. This report shows that although the number of uninsured Marylanders remained stable during 2001-2003, the number of individuals obtaining coverage through employer-sponsored insurance fell by 3 percent. If employer-sponsored coverage is to continue to be a primary source of insurance, we must look toward providing new products that are affordable to employers, attractive to employees, and can be supported by the insurance industry.

This report provides timely information on the number of Marylanders that are uninsured, characteristics of the uninsured, and possible reasons why that population may not have access to insurance. I believe this report will inform policymakers and assist in the development of prudent policies to reduce the number of uninsured.

Stephen J. Salamon
Chairman



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TABLE OF CONTENTS

OVERVIEW.....	4
---------------	---

KEY COMPARISONS	7
-----------------------	---

Trends in Health Care Coverage

Figure 1: Health Insurance Coverage of the Nonelderly: Maryland and United States, 2002–2003	9
Figure 2: Changes in Maryland Health Insurance Coverage, 2001–2002 to 2002–2003	9
Figure 3: Changes in the Percent and Number of Uninsured Children and Nonelderly Adults, 2001–2002 to 2002–2003	10

Profile of the Uninsured Population

Figure 4: Health Insurance Coverage of the Nonelderly by Age, 2002–2003	10
Figure 5: Health Insurance Coverage of Nonelderly Adults by Marital Status and Gender, 2002–2003	11
Figure 6: The Nonelderly Uninsured by Children/Parent Status, 2002–2003	11
Figure 7: The Nonelderly Uninsured by Poverty Level, 2002–2003	12
Figure 8: Nonelderly Uninsured Rates and Distribution by Poverty Level and Age, 2002–2003	12
Figure 9: The Nonelderly Uninsured by Children/Parent Status and Poverty Level, 2002–2003	13
Figure 10: Uninsured Children by Parent Insured Status and Poverty Level, 2002–2003	13
Figure 11: Health Insurance Coverage of the Nonelderly by Highest Educational Level in Family, 2002–2003	14
Figure 12: Nonelderly Uninsured Rates and Distribution by Highest Educational Level in Family and Poverty Level, 2002–2003	14
Figure 13: Health Insurance Coverage of the Nonelderly by Citizenship, 2002–2003	15
Figure 14: Nonelderly Uninsured Rates and Distribution by Citizenship and Poverty Level, 2002–2003	15
Figure 15: Health Insurance Coverage of the Nonelderly by Racial/Ethnic Groups, 2002–2003	16
Figure 16: Nonelderly Uninsured Rates and Distribution by Racial/Ethnic Groups and Poverty Level, 2002–2003	16
Figure 17: Nonelderly Uninsured Rates and Distribution by Racial/Ethnic Groups and Highest Educational Level in Family, 2002–2003	17
Figure 18: Nonelderly Uninsured Rates and Distribution by Racial/Ethnic Groups and Citizenship, 2002–2003	17
Figure 19: Health Insurance Coverage of the Nonelderly by Family Work Status: Persons Not Living with Relatives, 2002–2003	18
Figure 20: Health Insurance Coverage of the Nonelderly by Family Work Status: Persons Living with Relatives, 2002–2003	18
Figure 21: The Nonelderly Uninsured by Family Work Status, 2002–2003	19
Figure 22: The Nonelderly Uninsured by Family Work Status and Poverty Level, 2002–2003	19

Health Insurance Coverage Among Workers

Figure 23: Employer-based Coverage Among Workers Ages 19–64 by Sector and Firm Size, 2002–2003	20
Figure 24: Employment Status of Adults Ages 19–64 in Maryland and United States, 2002–2003	20
Figure 25: Uninsured Workers Ages 19–64 by Sector and Firm Size, 2002–2003	21
Figure 26: Uninsured Workers Ages 19–64 by Firm Size/Sector and Poverty Level, 2002–2003	21
Figure 27: Health Insurance Coverage Among Workers Ages 19–64 by Duration of Employment, 2002–2003	22
Figure 28: Uninsured Workers Ages 19–64 by Duration of Employment, 2002–2003	22

TABLES	23
------------------	----

Health Insurance Coverage of the Nonelderly Population, 2002–2003

Table 1: Health Insurance Coverage of the Nonelderly, 2002–2003	24
Table 2: Health Insurance Coverage of Children, 2002–2003	25
Table 3: Health Insurance Coverage of Nonelderly Adults, 2002–2003	26
Table 4: Health Insurance Coverage of Nonelderly Adult Workers, 2002–2003	27

Profile of the Nonelderly Uninsured Population, 2002–2003

Table 5: Characteristics of the Nonelderly Uninsured, 2002–2003	28
Table 6: Characteristics of Uninsured Children, 2002–2003	29
Table 7: Characteristics of Uninsured Nonelderly Adults, 2002–2003	30
Table 8: Characteristics of Uninsured Nonelderly Adult Workers, 2002–2003	31

TABLE ENDNOTES	32
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Overview

This report provides information on the insurance status of the nonelderly population in Maryland during 2001–2003, the most current period for which information is available. The report is organized to meet the needs of those who wish to understand broad patterns and trends in coverage, as well as those who require more detailed information. The Key Comparisons section contains figures that compare coverage rates among key populations and describe the nonelderly uninsured in considerable detail. Tables with information on insurance coverage status by demographic characteristics, income and employment for all non-elderly, and subsets of that population, follow the Key Comparisons. All tables and figures are based on two-year averages of 2001–2002 or 2002–2003 survey data. The data for 2001–2002 are in last year's report¹; the analyses in the two reports are nearly identical to enable comparisons over time.

During 2000–2002, Maryland experienced an increase in its 2-year-average uninsured rate, but the rate was statistically stable during 2001–2003. The 2002–2003 nonelderly uninsured rate was 15.3 percent, with about 740,000 uninsured. The uninsured rate for all residents, 13.6 percent, is lower because it includes the elderly who are nearly all insured. The employment-based coverage rate, which declined from 77 percent to 75 percent² during 2000–2002, continued falling to 72 percent in 2002–2003. During 2000–2003, the state's average unemployment rate rose annually, with a .4% increase in 2002 and a .1% increase in 2003; every .1% increase in the unemployment rate adds 2,900 workers to the ranks of the jobless. Family incomes decreased among Maryland's nonelderly during 2001–2003³. As a result, the proportion of low-income (up to 200% of poverty: \$29,620 for a family of three in 2003) residents increased during 2001–2003, especially in the near poor (101–200 %) segment. Conversely, the proportion with family incomes above 400 percent of the

poverty level declined, especially in the high income (601%+) segment. The loss of income, coupled with a higher uninsured rate among the poor (0–100%) and a lower uninsured rate among those with high income, significantly altered the income distribution of the state's uninsured during 2001–2003: the low-income share increased (41% to 49%) while the share with high income fell (7% to 6%).

The uninsured rate increase for low-income residents is reflected in higher uninsured rates for low-income adults ages 19–34 and 35–64. But uninsured rates among children did not increase; instead the uninsured rate for children with family incomes between 201–400 percent of the poverty rate declined. Uninsured rates increased among low-income U.S. citizens but not among comparable non-U.S. citizens. Although the uninsured rate increased among workers not living with relatives, it fell among residents living in families with 2 or more workers, with at least 1 worker in a private firm of 100+ employees.

The report identifies some changes in employment-based/private rates during 2001–2003. The employment-based rate among children ages 0–9 declined, but was off-set by an increase in Medicaid & Other Public coverage. Similarly, the private insurance rate fell for persons living in families where the highest educational attainment among the adults is graduation from high school but was off-set by increased use of Medicaid & Other Public coverage. Private coverage also declined among those in families where the adults have an associate degree/some college and in workers not living with family who work in smaller (<100 employees) private firms.

As in other years, Maryland's nonelderly uninsured rate in 2002–2003 is below the comparable national average (17.4%). Maryland has a higher rate of employment-based coverage,

primarily due to a higher employment rate among adults. The state's Medicaid rate is below the national average mainly due to greater affluence, with a majority of the state's residents having family incomes above 400 percent of poverty (\$59,240 for a family of 3 in 2003) compared to two-fifths of residents nationwide. Maryland Medicaid covers a lower percentage of adults in poverty than the national average, but the impact of this policy on the state's Medicaid rate is small. Maryland's coverage rates among adults at or below the poverty level during 2002-2003 were 21% Medicaid, 25% private insurance, 6% other public, and 48% uninsured, compared to national averages of 29% Medicaid, 23% private insurance, 5% other public, and 43% uninsured. If the national Medicaid rate were applied to Maryland's poor adults—drawing all new enrollees from the uninsured only—Medicaid enrollment would rise by 19,000, making the state's Medicaid rate closer to 8% but leaving the uninsured rate only marginally lower (14.9% versus 15.3%). If such an increase in the state's coverage of poor adults under Medicaid induced persons to switch from private or other public coverage to Medicaid, then the impact on the uninsured rate would be even smaller.

Even with the shift in Maryland's uninsured to a higher share with low-incomes, the state still has relatively fewer low-income uninsured compared to the national average: 48% versus 54%. Uninsured rates for non-Hispanic Whites and Blacks are below national averages, but because more of the state's residents are Black and fewer are White (relative to the nation), the state's uninsured population is more likely to be Black. Nearly half of the state's Hispanic residents are uninsured, a rate above the national average. Consequently Hispanics form 23 percent of the state's uninsured even though they comprise just 7 percent of the nonelderly. Although the uninsured rate among Maryland's non-U.S. citizens (nearly 50%) is close to the national average, non-U.S. citizens comprise a larger share of the state's nonelderly

than nationwide (9% versus 8%). As a result, non-U.S. citizens form 29 percent of the uninsured in Maryland compared to 21 percent nationwide.

¹www.mhcc.state.md.us/health_care_expenditures/insurance_coverage/mhcc_insurance_report_1103.pdf

²Statistically significant at $\alpha = .10$.

³The per capita family income distribution reveals a reduction in the proportion of nonelderly with per capita incomes of \$15,000 or more (e.g., \$45,000+ for a family of 3) and an increase in the proportion with \$5,000-\$14,999 per capita, especially in the \$10,000-\$14,999 range (e.g., \$30,000-\$44,999 for a family of 3).

Key Comparisons

ABOUT THE HEALTH INSURANCE COVERAGE ESTIMATES

The data in this report are based on an analysis of the Census Bureau's Current Population Survey (CPS), March 2001 through March 2004 Annual Social and Economic (ASEC) Supplements. The CPS is the main source of information on health insurance coverage in the United States. Health insurance coverage is likely under-reported in the CPS. Many people who are covered by Medicaid do not report this coverage in the CPS, and although Census compensates for this by imputing Medicaid coverage for some respondents, the resultant Medicaid coverage rate is below administrative counts. Whether there is under-reporting among the privately insured is unknown. Although the uninsured rate produced from the CPS is supposed to reflect the percentage of the population uninsured for the entire (preceding) year, in fact, the rate is too large to be limited to those lacking insurance for 12 months. Some researchers consider the CPS rate to be closer to a point-in-time rate. MHCC analyses comparing the CPS national and regional insured rates to duration of coverage rates in the Medical Expenditure Panel Survey–Household Component (MEPS–HC) indicate that the CPS uninsured rate corresponds to the proportion who are without any coverage for 7 months or more of the year. Whatever it reflects, the CPS rate can be reliably used to measure *changes* in coverage over time.

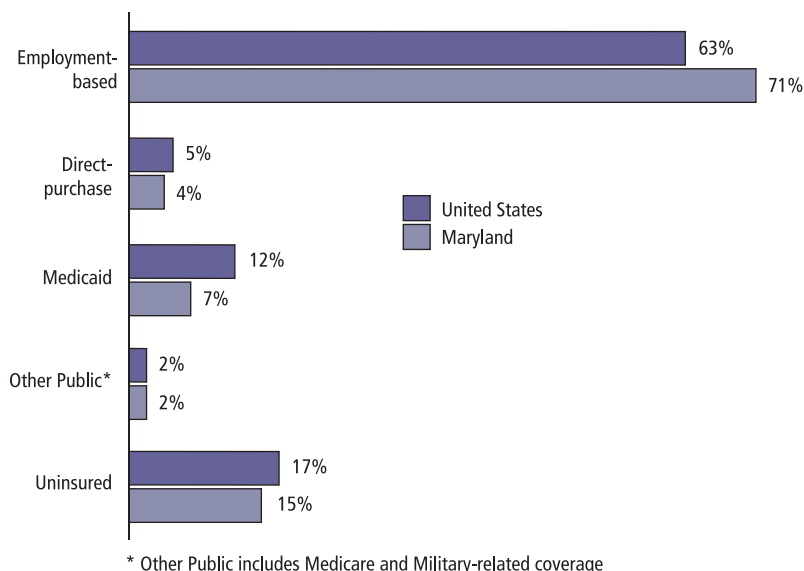
The CPS is designed to produce information for the U.S. as a whole and for each state. But due to the relatively small sample sizes collected from most states, the Census Bureau recommends that states use two- or three-year running averages to track changes over time in the uninsured rate for an entire population. Although the sample for Maryland nearly doubled beginning with the 2000 data (permitting us to go from three-year averages to two-year averages), the small sample size still interferes with the calculation of rates for sub-populations within the state, such as rates by income-level or race/ethnicity. Specific rates (point estimates) constructed from small samples are very imprecise. We present the rates for sub-populations in this report rounded to the nearest percent—in spite of their imprecision—because many people are interested in their estimated values. However, the reader needs to bear in mind

that small differences among rates for sub-populations within the 2001–2003 calendar year data are not statistically significant and even apparently large differences cannot be assumed to be statistically significant. Due to staffing and time limitations, we restricted statistical testing to just those cases with a strong possibility of being statistically significant. These cases are noted in the Key Comparisons section; the information in the Tables section did not undergo statistical testing. Due to rounding, the percentages in some figures may not sum to 100%.

The survey asks about all coverage over a 12-month period, therefore multiple-coverage could have occurred simultaneously or sequentially during the year. About 7 percent of Maryland's under-65 residents with health insurance report having had more than one type of coverage on the CPS. Among the privately insured, about 5% report also having had some type of public coverage. A quarter of those with Medicaid report multiple coverage: 15% private insurance and 10% other public coverage. Almost two-thirds of those with other public coverage (military or Medicare) cite multiple coverage: among those with military coverage it is predominantly employer-based coverage; among those with Medicare it is usually Medicaid. The reader should refer to Figure 2 in the report to see the total percentage of residents that reported having had each type of coverage; the total for this figure exceeds 100%. To simplify discussions of coverage, in all other figures persons who reported multiple-coverage have been assigned to a single category, making the sum of all types of coverage equal 100%. The rules for the assignment are hierarchical and are described in the *Table Endnotes* under item *b* on page 32. Because Medicaid is assigned first, the Medicaid percentages in Figure 1 and Figure 2 match, but the percentages for the other coverage categories are all smaller in Figure 1 than in Figure 2. The gap is especially significant for other public coverage, the majority of which is absorbed into the Medicaid and employer-based categories in Figure 1 due to the order of the hierarchy.

Figure 1

Health Insurance Coverage of the Nonelderly: Maryland and United States, 2002-2003

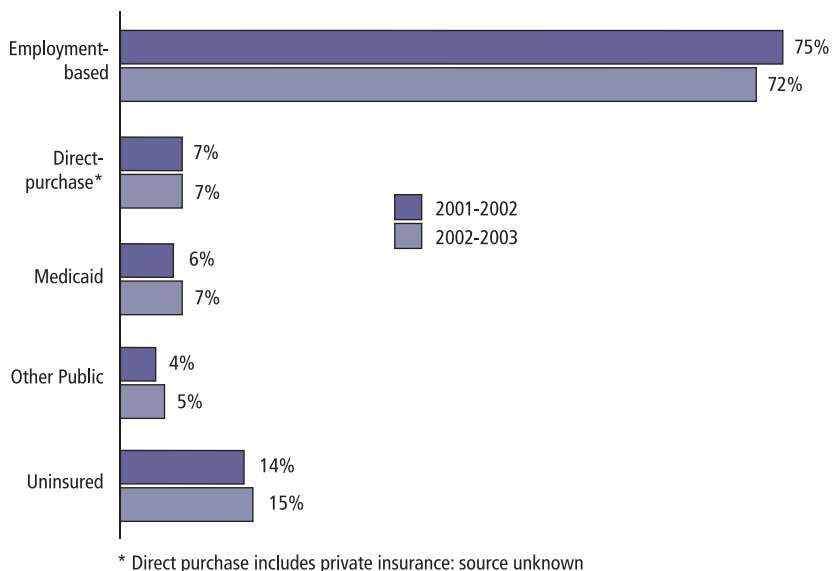


HISTORICALLY THE STATE'S TWO-YEAR

average uninsured rate has been consistently below the national rate. The primary source of health insurance is employment-based coverage, and it is significantly more common in Maryland than nationwide, mainly due to the state's employment rate (Figure 24). Maryland has one of the nation's lowest poverty rates, which results in a Medicaid coverage rate below the national average. (See page 8 for how the Medicaid & uninsured rates would change if Maryland Medicaid covered a greater share of adults in poverty.)

Figure 2

Changes in Maryland Health Insurance Coverage, 2001-2002 to 2002-2003 (percent of the nonelderly)



MARYLAND'S TWO-YEAR-AVERAGE

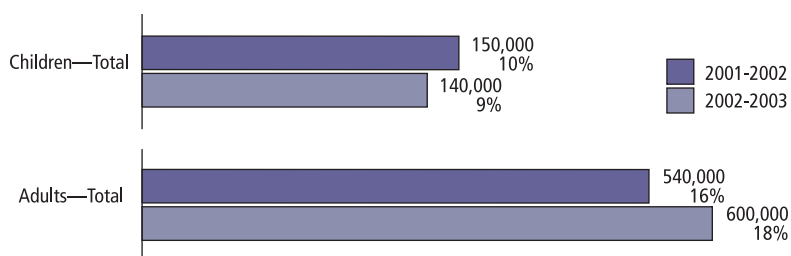
nonelderly uninsured rate nominally shifted from 14.4% to 15.3% during 2001-2003, but the change is not statistically significant. However, there was a significant decline in employment-based coverage during this period from about 75% to 72%, which continues the decline from 77% to 75% observed during 2000-2002. Apparent slight increases in Medicaid and Other Public coverage rates during 2001-2003, while not statistically significant, offset enough of the reduction in employment-based coverage to keep the uninsured rate stable. (See page 8 for why percentages differ in Figures 1 & 2.)

THE TWO-YEAR AVERAGE UNINSURED

rates for children, along with the number of uninsured children, did not change significantly during 2001–2003. The apparent increases in the adult uninsured rate and the number of uninsured adults were not statistically significant (using a 90% confidence interval).

Figure 3

Changes in the Percent and Number of Uninsured Children and Nonelderly Adults, 2001-2002 to 2002-2003



AS IN THE NATION AS A WHOLE,

young adults, ages 19–29, in Maryland have the highest risk of being uninsured of any age group, mainly because they are the least likely to have employer-based insurance. Children and adults ages 55–64 are most likely to be insured. During 2001–2003 children ages 0–9 were the only age group to exhibit a significant decline in employment-based insurance (from 75% to 67%), but this was balanced by a significant increase in Medicaid coverage (including the Children’s Health Insurance Program) from about 15% to 21%.

Figure 4

Health Insurance Coverage of the Nonelderly by Age, 2002-2003

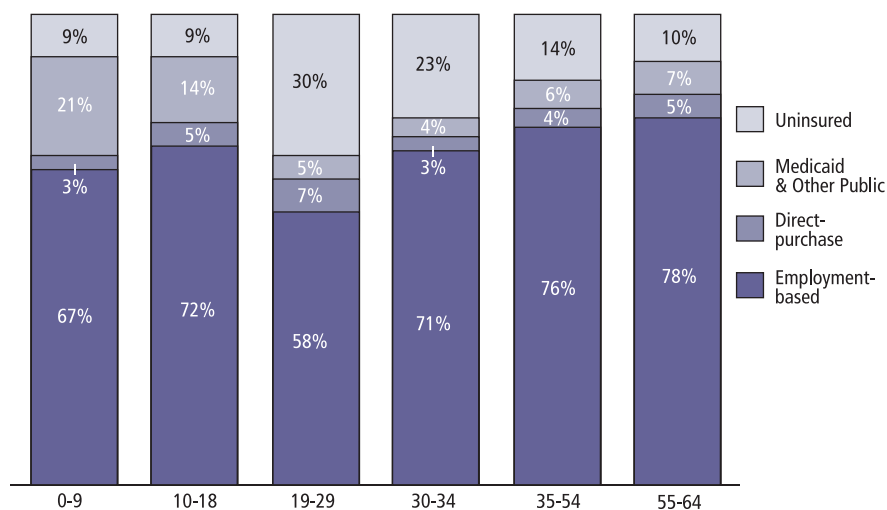
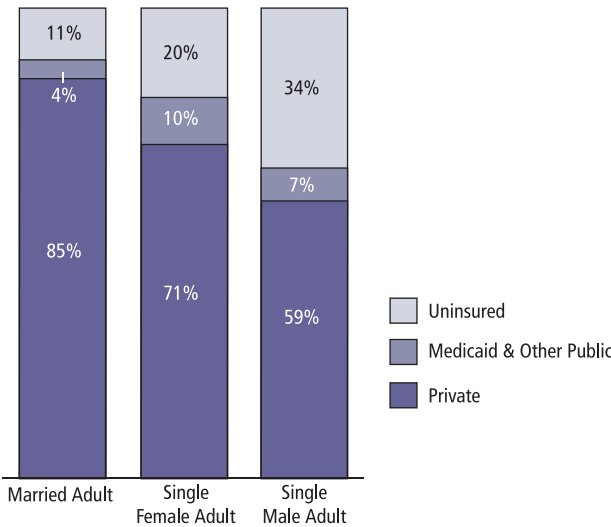


Figure 5

Health Insurance Coverage of Nonelderly Adults, by Marital Status and Gender, 2002-2003

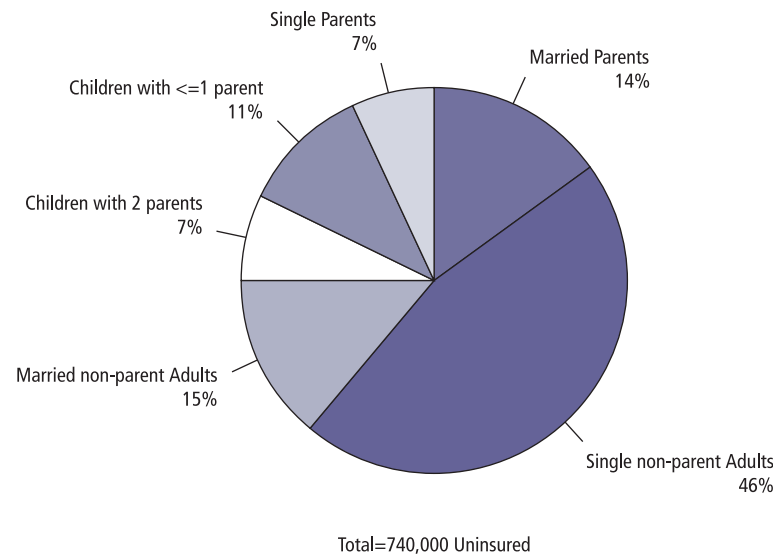


COMPARED TO SINGLE ADULTS,

married adults are significantly more likely to be insured, probably because they tend to have higher incomes, different attitudes toward risk, and, if both spouses have jobs, increased access to employment-based insurance. Among single adults, the uninsured rate varies significantly by gender, with females more likely to be insured (regardless of age), mainly due to a higher rate of private insurance use. This female-male gap is not income-related: it reflects different attitudes toward health insurance and possibly dissimilar access to employment-based insurance due to different job choices.

Figure 6

The Nonelderly Uninsured by Children/Parent Status, 2002-2003



ADULTS WITHOUT DEPENDENT

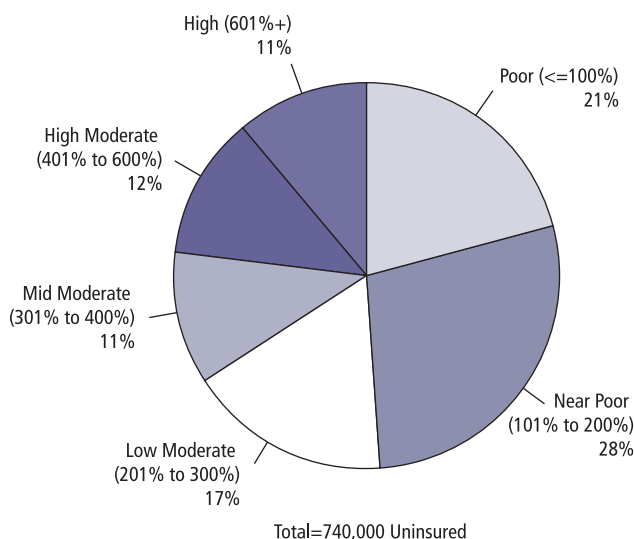
children younger than age 19 comprise the majority (61%) of Maryland's uninsured, and most of them are single. Single, non-parent adults are a disproportionate share of the uninsured—they are just one-fourth of all nonelderly—as are single parents and children living with one parent or without a parent (5% and 10%, respectively, of all nonelderly). Married parents form just 14% of the uninsured, but this is significantly increased from 11% in 2001-2002.

MARYLAND FAMILY INCOME FELL

during 2001–2003, which increased the proportion of residents with low incomes—up to 200% of the poverty level (\$29,620 for a family of three in 2003)—and decreased the share with high incomes above 600% of the poverty level (\$88,860 for a family of three in 2003). This shift, coupled with some uninsured rate changes, significantly altered the income distribution of the state’s uninsured with an increase in the low-income share (from 41% to 49%) and a decrease in the high income proportion (from 15% to 11%). Uninsured rates during 2001–2003 increased for the poor (35% to 39%) and decreased for high-income residents (7% to 6%).

Figure 7

The Nonelderly Uninsured by Poverty Level, 2002-2003



YOUNG ADULTS AGES 19-34 IN

Maryland are less likely to have health insurance than children or older adults, regardless of income (standardized as a percentage of the poverty level for that family size), so they are disproportionately represented among the uninsured: 41% versus 22% of the nonelderly. During 2001–2003, the uninsured rate increased for low-income adults, whether younger (49% to 54%) or older (34% to 38%), but fell among children with lower moderate family incomes (10% to 8%).

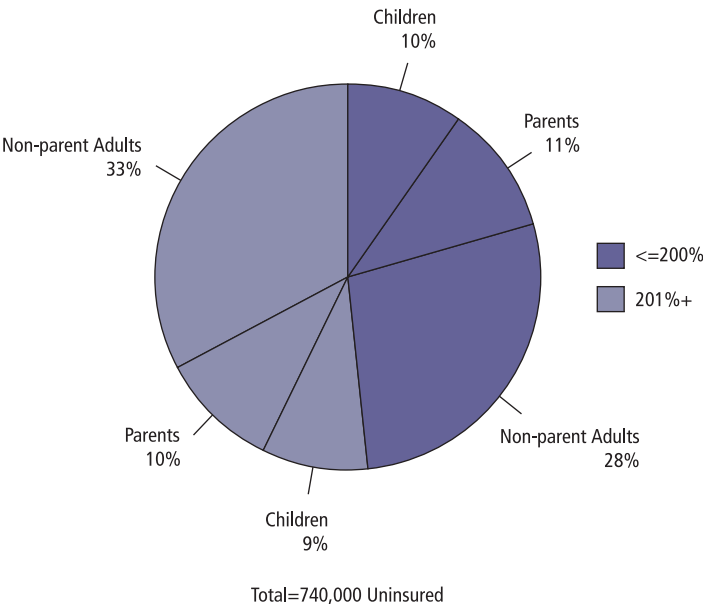
Figure 8

Nonelderly Uninsured Rates and Distribution by Poverty Level and Age, 2002-2003

Age	Uninsured Rate			Uninsured Distribution		
	Low Income (0-200%)	Lower Moderate (201-400%)	Higher Moderate to High (401%+)	Low Income (0-200%)	Lower Moderate (201-400%)	Higher Moderate to High (401%+)
0-18	19%	8%	5%	10%	5%	4%
19-34	54%	28%	13%	20%	12%	8%
35-64	38%	15%	6%	19%	11%	11%

Figure 9

The Nonelderly Uninsured by Children/Parent Status and Poverty Level, 2002-2003

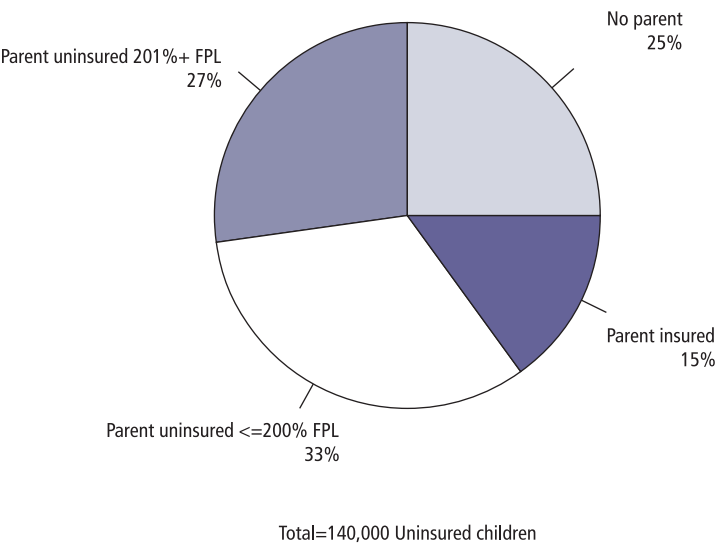


IN SPITE OF LOWER INCOMES IN

2002-2003, the majority of uninsured children, parents, and non-parent adults (adults without children under age 19) in Maryland continue to have family incomes above 200% of the poverty level. Among the low-income (up to 200% of the poverty level) uninsured, the majority are non-parent adults.

Figure 10

Uninsured Children by Parent Insured Status and Poverty Level, 2002-2003



ALTHOUGH JUST 12% OF CHILDREN

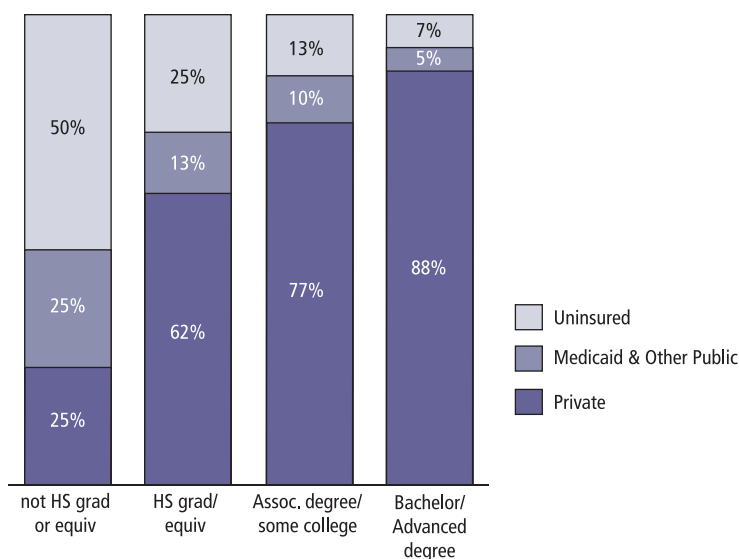
in Maryland live with an uninsured parent, nearly half of them are uninsured. They account for the majority of uninsured children and are equally likely to have family incomes above and below 200% of the poverty level. Only 2% of children who live with an insured parent are uninsured, while about two-fifths of children who do not live with a parent are uninsured, similar to the rate for children living with an uninsured parent.

THE HIGHEST EDUCATIONAL

attainment of the adults in a family is a predictor of being insured. Half of the persons who live in families in which the adult(s) did not graduate from high school are uninsured. Among persons in families where the adult(s) had no education beyond high school, private coverage declined (from 67% to 62%) during 2001–2003 while Medicaid coverage increased (from 10% to 13%).

Figure 11

Health Insurance Coverage of the Nonelderly by Highest Educational Level in Family, 2002-2003



HIGHER EDUCATIONAL ATTAINMENT

by the adult(s) in the family appears to be associated with a greater probability of having insurance, regardless of family income. Persons in families where the adults did not graduate from high school have the same high uninsured rate whether they have low or moderate incomes; during 2001–2003 those with low incomes became more common among the uninsured: 11% to 15%. Low-income persons in families with associate degrees/some college also grew among the uninsured: 7% to 10%. Conversely, persons in families with BA degrees or better became less common among the uninsured: 26% to 21%.

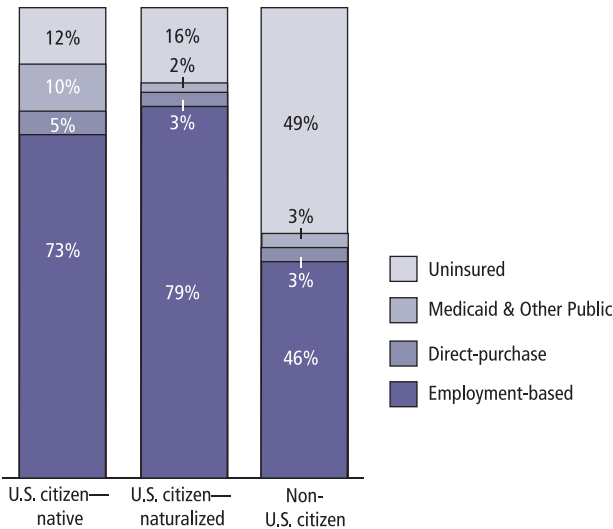
Figure 12

Nonelderly Uninsured Rates and Distribution by Highest Educational Level in Family and Poverty Level, 2002-2003

Highest Education Attainment in Family	Uninsured Rate			Uninsured Distribution		
	Low Income (0-200%)	Lower Moderate (201-400%)	Higher Moderate to High (401%+)	Low Income (0-200%)	Lower Moderate (201-400%)	Higher Moderate to High (401%+)
Not HS grad or equiv	52%	47%	ns	15%	5%	2%
HS grad/equiv	37%	22%	13%	18%	12%	ns
Assoc. degree/some college	33%	12%	6%	10%	7%	4%
Bachelor/Advanced degree	21%	6%	5%	6%	3%	12%

Figure 13

Health Insurance Coverage of the Nonelderly by Citizenship, 2002-2003



NEARLY HALF OF MARYLAND

residents who are not U.S. citizens do not have insurance. They differ markedly from naturalized citizens whose coverage is not significantly different from that of native citizens. Maryland's uninsured rate for non-citizens is the same as the national average, but among naturalized citizens the state's uninsured rate is lower: 16% versus 21%.

Figure 14

Nonelderly Uninsured Rates and Distribution by Citizenship and Poverty Level, 2002-2003

Citizenship	Uninsured Rate			Uninsured Distribution		
	Low Income (0-200%)	Lower Moderate (201-400%)	Higher Moderate to High (401%+)	Low Income (0-200%)	Lower Moderate (201-400%)	Higher Moderate to High (401%+)
U.S. citizen	28%	12%	6%	31%	19%	20%
Non-U.S. citizen	66%	50%	19%	17%	9%	3%

COMPARED TO U.S. CITIZENS IN

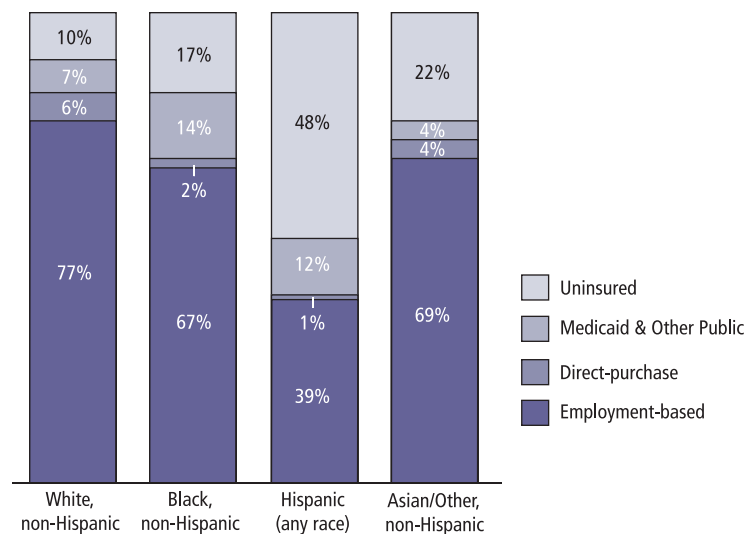
Maryland, non-citizens are significantly less likely to have health insurance, regardless of family income. Because only certain qualified non-citizens are eligible for Medicaid, the uninsured rate for low-income non-citizens should be higher than for citizens. But the high uninsured rates within every income level suggest that immigrants' experiences with health care in their native countries are dissimilar to the key behaviors expected within the U.S. system. Non-citizens are 9% of the state's nonelderly but comprise 29% of the uninsured. Although the citizen share of the uninsured did not change during 2001-2003, the low-income citizen share increased from 25% to 31%.

EMPLOYMENT-BASED INSURANCE

rates vary significantly by race/ethnicity. Only 39% of Hispanics have employment-based coverage, so it is not surprising that nearly half of Hispanics are uninsured. The employment-based rates for Blacks (non-Hispanic) and Asians/Others (non-Hispanic) are similar but lag behind the rate for non-Hispanic Whites, producing similar, above-average uninsured rates for these minority populations. Blacks and Hispanics are equally likely to have Medicaid coverage. Compared to the U.S., the state's uninsured rates for Whites and Blacks are lower, but the rate for Hispanics is higher (48% versus 34%).

Figure 15

Health Insurance Coverage of the Nonelderly by Racial/Ethnic Groups, 2002-2003



SOME OF THE RACIAL/ETHNIC

differences in coverage patterns (Figure 15) are explained by income: Hispanics, and to a lesser extent, Blacks are more likely to be low-income than Whites or Asians/Others in Maryland. Most differences in uninsured rates by race/ethnicity at high or low income levels are not statistically significant due to some small cell sizes. Among the low-income, Hispanics and Asians/Others have significantly higher uninsured rates compared to low-income Whites. But between 201-400% of poverty the uninsured rates all differ significantly by racial/ethnic group. Hispanics are disproportionately represented among the uninsured (Table 5), and the low-income & Hispanic share of the uninsured increased during 2001-2003 due to an increase in the percentage of Hispanics with low incomes.

Figure 16

Nonelderly Uninsured Rates and Distribution by Racial/Ethnic Groups and Poverty Level, 2002-2003

Race Groups	Uninsured Rate			Uninsured Distribution		
	Low Income (0-200%)	Lower Moderate (201-400%)	Higher Moderate to High (401%+)	Low Income (0-200%)	Lower Moderate (201-400%)	Higher Moderate to High (401%+)
White, non-Hispanic	25%	10%	6%	14%	9%	12%
Black, non-Hispanic	33%	16%	8%	16%	9%	7%
Hispanic (any race)	64%	43%	18%	14%	7%	2%
Asian/Other, non-Hispanic	49%	24%	11%	4%	3%	3%

Figure 17

Nonelderly Uninsured Rates and Distribution by Racial/Ethnic Groups and Highest Educational Level in Family, 2002-2003

Race Groups	Uninsured Rate		Uninsured Distribution	
	Not HS grad/HS grad	Some college/ Bachelor/ Advanced degree	Not HS grad/HS grad	Some college/ Bachelor/ Advanced degree
White, non-Hispanic	21%	6%	19%	17%
Black, non-Hispanic	26%	13%	16%	17%
Hispanic (any race)	62%	18%	20%	3%
Asian/Other, non-Hispanic	64%	15%	4%	6%

EDUCATIONAL ATTAINMENT PLAYS

a part in explaining racial/ethnic differences in coverage: two-thirds of Hispanics (up from 56% in 2001-2002) live in families where adults have a high school education or less compared to one-third of Blacks, one-fourth of Whites, and 14% of Asians/ Others. However, all minorities living in families where at least one adult went to college are less likely to be insured than are Whites in comparably educated families. Uninsured Whites and Blacks are divided about equally between the two educational levels. In contrast, nearly 90% of uninsured Hispanics are in families where the adults have a high school education or less.

Figure 18

Nonelderly Uninsured Rates and Distribution by Racial/Ethnic Groups and Citizenship, 2002-2003

Race Groups	Uninsured Rate		Uninsured Distribution	
	U.S. citizen	Non-U.S. citizen	U.S. citizen	Non-U.S. citizen
White, non-Hispanic	9%	28%	33%	3%
Black, non-Hispanic	16%	39%	28%	5%
Hispanic (any race)	20%	69%	4%	19%
Asian/Other, non-Hispanic	19%	29%	6%	3%

MINORITY RESIDENTS WHO ARE U.S.

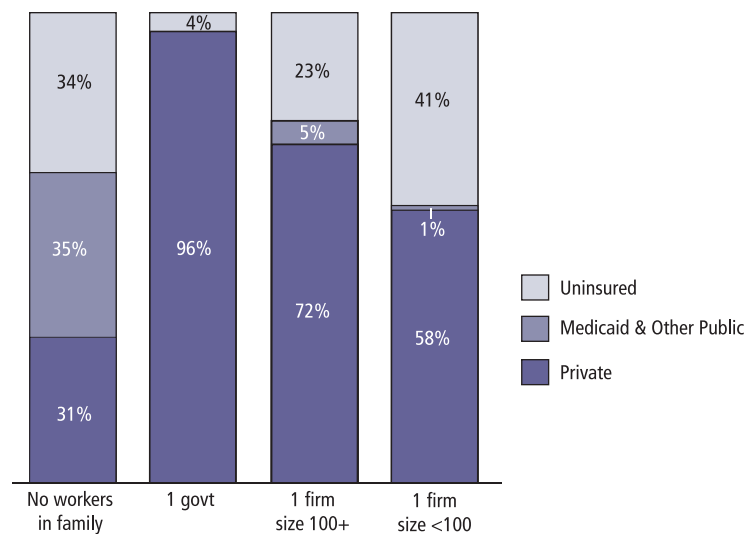
citizens have statistically similar uninsured rates, but their rates are above that of non-Hispanic White citizens. Uninsured rates are higher in non-citizens, regardless of race/ethnicity, and are statistically similar for all groups except Hispanics, whose rate is about twice as high. Consequently, Hispanics comprise 45% of non-citizens in Maryland but about two-thirds of uninsured non-citizens. Although the non-citizen share of Black residents declined during 2001-2003, it remains above the national average, as is the non-citizen share of Hispanic residents.

THE UNINSURED RATE AMONG PERSONS

who do not live with family—of which 33% work in smaller private firms (less than 100 employees), 30% in larger firms, and 17% for government—is 27%, about twice the rate for those living with relatives (Figure 20) and up from 22% in 2001–2002. One-fifth of persons living alone are children or non-working adults; thanks to Medicaid, their uninsured rate is statistically similar to the rate for adults working in smaller firms. The privately insured rate for adults working in smaller firms fell during 2001–2003: this increased their uninsured rate and helped to push down the overall employment-based insurance rate. Compared to those in small firms, employees in larger firms are more likely to have private coverage and less likely to be uninsured, but nearly all government workers have private coverage.

Figure 19

Health Insurance Coverage of the Nonelderly by Family Work Status: Persons Not Living with Relatives, 2002–2003

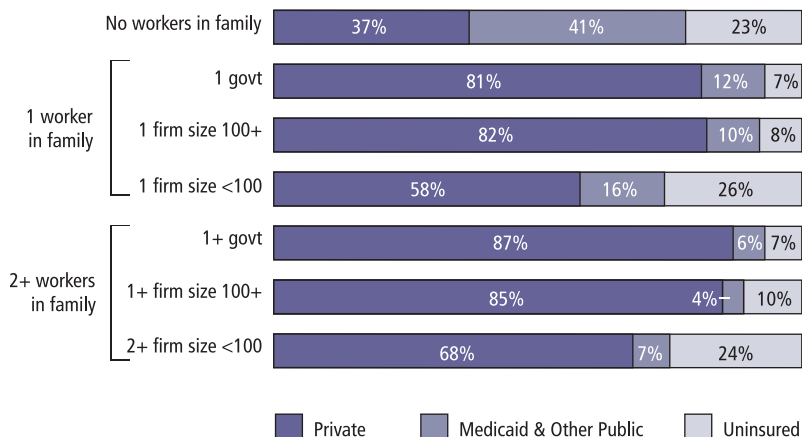


AMONG PERSONS LIVING WITH

family members, the uninsured rate was stable during 2001–2003 at 13%. Two-thirds live in families with two or more working adults, 29% are in one-worker families, and just 5% are in non-working families. Persons in single-worker families are associated with employment sectors in distribution similar to that for workers not living with family. But in 2+ worker families, only 18% are completely dependent on smaller private firms for employment-based insurance (compared to 42% in one-worker families), and 39% live in families with at least one government worker, which results in a higher private insurance rate (83% versus 72%) and lower uninsured (11% versus 16%) and Medicaid rates relative to one-worker families. (However, more than 2 workers is not an advantage—see Table 1.)

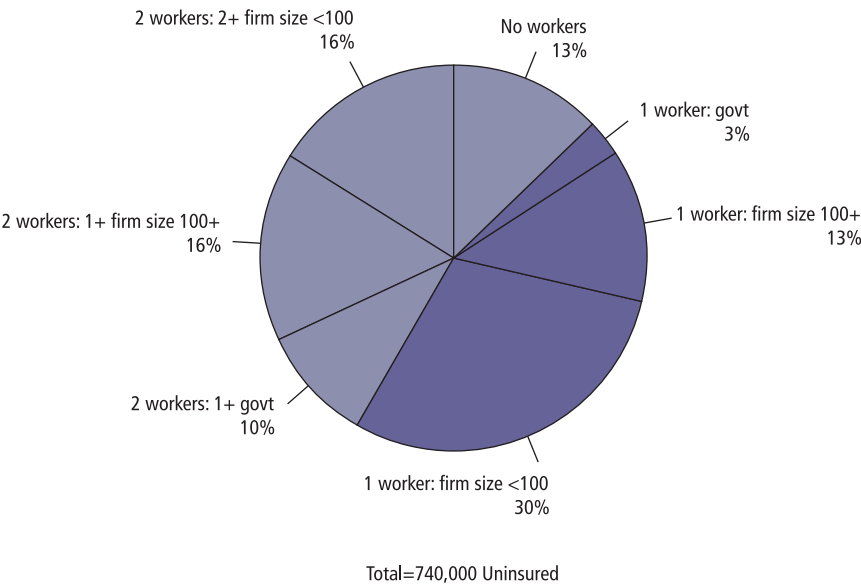
Figure 20

Health Insurance Coverage of the Nonelderly by Family Work Status: Persons Living with Relatives, 2002–2003



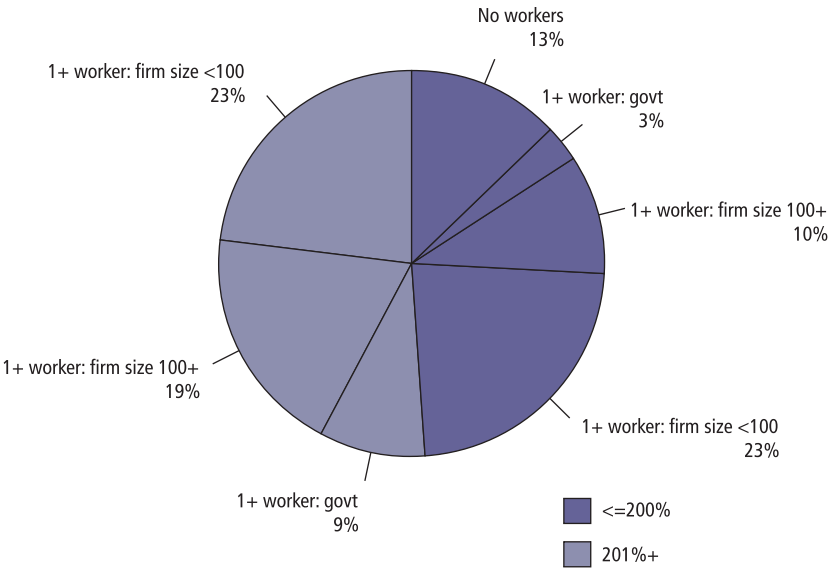
Families with more than one worker are assigned to employment sectors using a hierarchy: 1) any type (FT, PT, FY, PY) of government employee, 2) any type of employee for a private firm with 100+ employees, and lastly, 3) any type of employee for a small private firm.

Figure 21
The Nonelderly Uninsured by Family Work Status, 2002-2003



NINE OF 10 UNINSURED LIVE IN families (including single individuals) with 1 or more adult workers, about equally split between having 1 or 2+ workers. More than half of the uninsured have at least one family member working for a larger private firm or the government, and most of these live in two-worker families. Among the uninsured who are dependent on smaller private firms for employment-based coverage, most live in one-worker families.

Figure 22
The Nonelderly Uninsured by Family Work Status and Poverty Level, 2002-2003



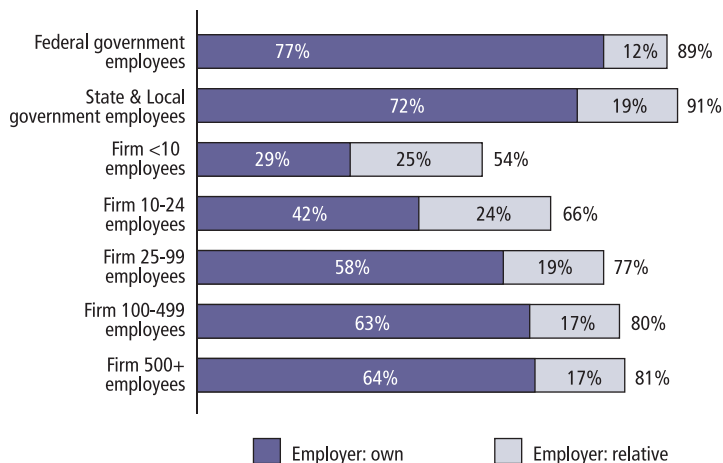
NEARLY ALL THE UNINSURED WHO live in non-working families (including single individuals) are low-income (up to 200% poverty level: \$29,620 for most Maryland families of 3 in 2003). But nearly 60% of uninsured in working families have incomes above 200% of the poverty level, ranging from half of persons in families with workers in smaller (fewer than 100 employees) private firms to 75% of those in families with at least one government worker.

AMONG ADULT WORKERS IN

Maryland, government employees (federal, state or local) are the most likely to have employment-based coverage, either through their own policy or the policy of a relative, and the least likely to be uninsured. Among employees in private firms, the likelihood of employment-based coverage tends to increase with firm size; the differences between adjacent firm sizes are not statistically significant except for the <10 to 10-24 comparison. The overall employment-based rate in Maryland workers, 77%, is significantly higher than the national average, 71%, making the uninsured rate among the state's workers (16%) better than the national rate (18%).

Figure 23

Employer-Based Coverage Among Workers Ages 19-64 by Sector and Firm Size, 2002-2003



THE STATE HAS A HIGHER RATE OF

employment-based insurance than the national average (Figure 1) mainly due to the state's higher employment rate among adults, supplemented by larger shares of employees in sectors/firm sizes with higher rates of employment-based coverage (Figure 23). Maryland's greater share of adult workers in federal employment and lower share in small firms, relative to national averages, help to make the state's employment-based coverage rate higher than the national average. So does a greater likelihood of employment-based coverage among nonworkers (47% versus 38%).

Figure 24

Employment Status of Adults Ages 19-64 in Maryland and United States, 2002-2003

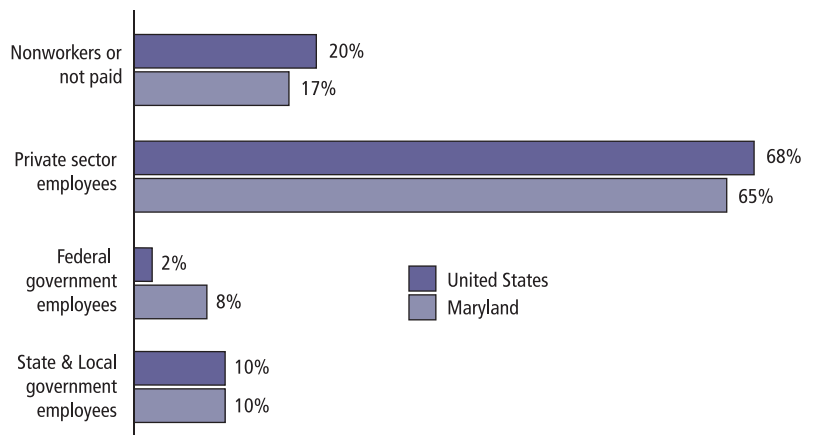
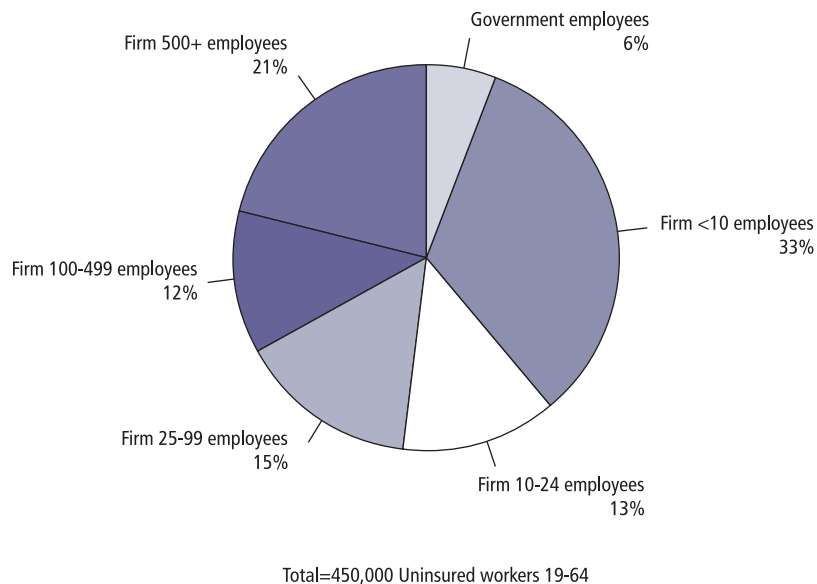


Figure 25

Uninsured Workers Ages 19-64 by Sector and Firm Size, 2002-2003

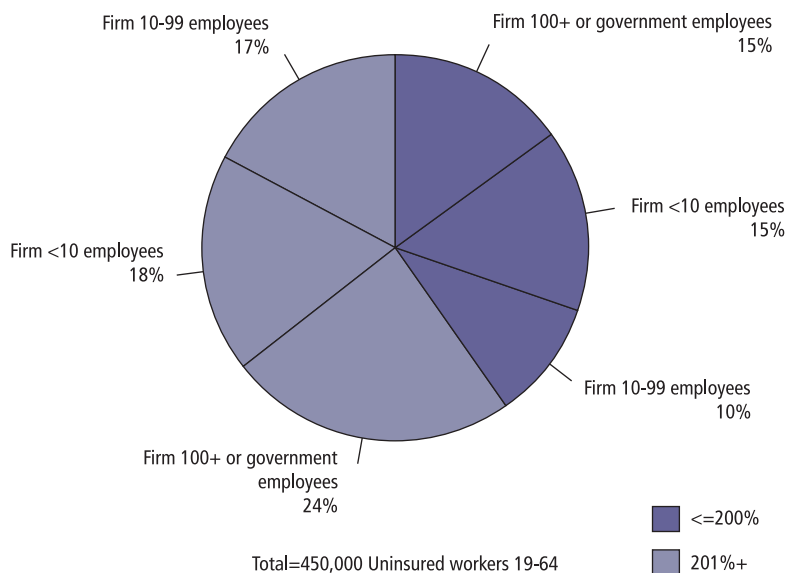


MORE THAN 60% OF MARYLAND'S

uninsured are employed adults. Those in smaller private firms (fewer than 100 employees) are disproportionately represented among uninsured workers: 38% of all workers versus 71% of the uninsured. Those in larger (100+ employees) private firms are slightly under-represented in the uninsured: 40% versus 33%. Government employees (federal, state or local) are 22% of adult workers in the state but account for just 6% of uninsured workers.

Figure 26

Uninsured Workers Ages 19-64 by Firm Size/Sector and Poverty Level, 2002-2003



REGARDLESS OF THEIR EMPLOYER

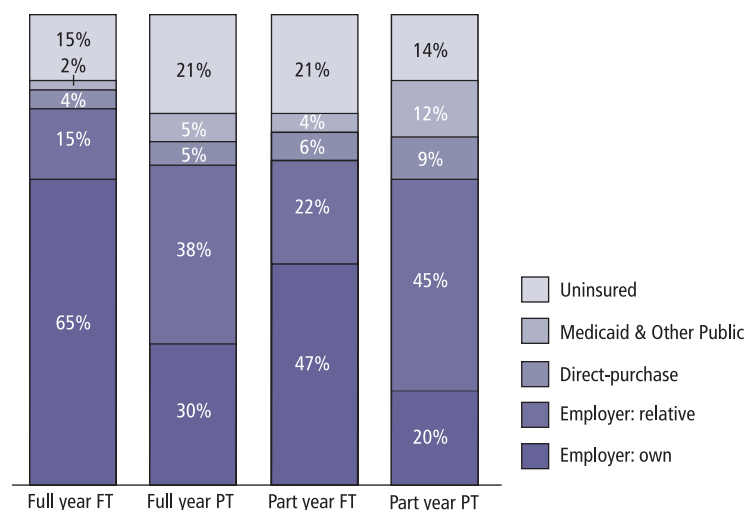
type, the majority of uninsured workers in Maryland have family incomes above 200% of the poverty level (\$29,620 for a family of three in 2003). The reduction in family income in Maryland during 2001-2003, however, is evident among uninsured workers: the low-income (family incomes up to 200% of the poverty level) share of uninsured workers increased during this period from 31% to 40%. The low-income in firms with fewer than 10 employees comprise 15% of uninsured in 2002-2003, up from 9% in 2001-2002.

AS EXPECTED, FULL-YEAR (FY),

full-time (FT) employees are more likely to have employment-based coverage through their own employer than are part-time (PT) and/or part-year (PY) (less than 48 weeks) employees. Part-time workers appear to be more likely to have employment-based coverage from a relative's employer than through their own employer, but the difference among FYPT workers is not statistically significant. During 2001-2003 the rate of direct-purchase coverage fell from 12% to 5% among FYPT workers, but did not result in a statistically significant higher uninsured rate. Among FY workers, the uninsured rate is higher for those working PT; the apparent difference in uninsured rates for FYPT and PYPT workers is not statistically significant.

Figure 27

Health Insurance Coverage Among Workers Ages 19-64 by Duration of Employment, 2002-2003

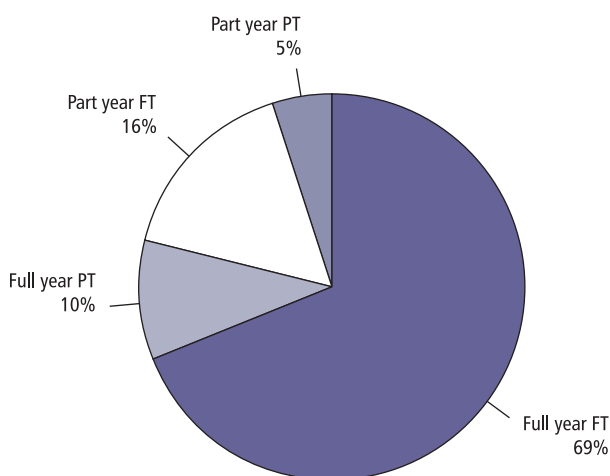


ALMOST THREE-FOURTHS OF ADULT

employees in Maryland work full-year, full-time (FYFT), so it is not surprising that—in spite of a lower uninsured rate compared to most employees who work less—FYFT workers comprise more than two-thirds of uninsured workers. The remainder of uninsured workers is about equally divided between PYFT employees and PT workers. The distribution of uninsured workers by duration of employment did not significantly change during 2001-2003.

Figure 28

Uninsured Workers Ages 19-64 by Duration of Employment, 2002-2003



Total=450,000 Uninsured workers 19-64

Tables

Table 1

Health Insurance Coverage of the Nonelderly, 2002–2003

			Percent Distribution by Coverage Type ^b			
			Employment-based	Direct-purchase	Medicaid & Other Public	Uninsured
Total - Nonelderly^a	Nonelderly (in thousands*)	4,850	71	4	9	15
Age						
	Children — Total	1,470	70	4	17	9
	Adults — Total	3,380	72	5	6	18
	Adults 19-24	430	53	9	6	32
	Adults 25-29	310	65	3	3	29
	Adults 30-34	350	71	3	4	23
	Adults 35-39	500	73	4	6	17
	Adults 40-54	1,230	77	4	6	13
	Adults 55-64	560	78	5	7	10
Gender						
	Female	2,450	73	4	10	13
	Male	2,400	69	4	9	18
Annual Family Income^c						
	up to \$25,573	790	30	6	25	39
	\$25,574 - \$51,145	1,080	64	6	12	18
	\$51,146 - \$90,018	1,350	81	4	5	10
	\$90,019+	1,620	88	3	3	6
Family Poverty Level^d						
	Poor (<=100%)	400	20	5	36	39
	Near Poor (101% to 200%)	620	39	8	19	34
	Low Moderate (201% to 300%)	640	67	3	10	20
	Mid Moderate (301% to 400%)	690	75	5	7	12
	High Moderate (401% to 600%)	1,050	84	4	3	9
	High (601%+)	1,460	89	3	3	6
Family Work Status^e						
	3+ Full-time	200	74	3	5	18
	2 Full-time	1,330	82	2	5	11
	1 Full-time	2,480	74	5	6	15
	Only Part-time	120	57	7	14	22
	Only Part-year	370	55	7	19	19
	Non-workers	340	27	8	38	28
Race/Ethnicity^f						
	White, non-Hispanic	2,790	77	6	7	10
	Black, non-Hispanic	1,390	67	2	14	17
	Hispanic (any race)	350	39	1	12	48
	Asian/Other, non-Hispanic	310	69	4	4	22
Citizenship						
	U.S. citizen—native	4,170	73	5	10	12
	U.S. citizen—naturalized	230	79	3	2	16
	Non-U.S. citizen, resident since before 1996	160	51	4	4	41
	Non-U.S. citizen, resident since 1996 or later	280	42	2	2	53
Health Status						
	Excellent	2,010	74	5	7	14
	Very good	1,650	75	4	6	14
	Good	890	63	3	13	21
	Fair/Poor	300	50	3	31	15

Table 2

Health Insurance Coverage of Children, 2002-2003

		Percent Distribution by Coverage Type ^b		
		Private	Medicaid & Other Public	Uninsured
Total - Children^g	Children (in thousands*) 1,470	74	17	9
Age				
	0-6 480	68	22	10
	7-12 490	75	17	7
	13-18 500	77	12	11
Annual Family Income^c				
	up to \$25,573 220	32	46	22
	\$25,574 - \$51,145 320	64	25	11
	\$51,146 - \$90,018 430	82	10	8
	\$90,019+ 500	91	5	4
Family Poverty Level^d				
	Poor (<=100%) 150	25	51	24
	Near Poor (101% to 200%) 220	49	36	16
	Low Moderate (201% to 300%) 230	73	17	10
	Mid Moderate (301% to 400%) 220	84	10	6
	High Moderate (401% to 600%) 310	86	6	7
	High (601%+) 330	93	4	2
Child Status^h				
	Child with 2 parents 1,000	85	10	5
	Child with 1 parent 390	54	33	13
	Child without parents 80	29	30	41
Family Work Status^e				
	1+ Full-time 1,210	79	12	8
	Only Part-time or Part-Year 150	58	36	6
	Non-workers 110	29	46	24
Highest Educational Level of Adults in Family				
	No HS diploma 80	18	57	24
	HS grad only 320	57	26	17
	Associate degree/some college 350	72	20	8
	BA/BS degree 370	88	8	4
	Graduate degree 340	88	7	5
Race/Ethnicity^f				
	White, non-Hispanic 800	85	11	4
	Black, non-Hispanic 470	62	25	13
	Hispanic (any race) 100	37	38	24
	Asian/Other, non-Hispanic 100	76	8	15
Citizenship				
	U.S. citizen 1,410	75	17	8
	Non-U.S. citizen 60	47	12	41
Health Status				
	Excellent 850	81	11	8
	Very good 410	74	16	11
	Good 190	45	44	11
	Fair/Poor 30	ns	ns	ns

Table 3

Health Insurance Coverage of Nonelderly Adults, 2002-2003

		Percent Distribution by Coverage Type ^b		
		Private	Medicaid & Other Public	Uninsured
Total - Nonelderly Adultsⁱ	Nonelderly (in thousands*) 3,380	76	6	18
Gender/Age				
Adult Males Total				
M 19-34	550	63	2	35
M 35-54	830	77	6	17
M 55-64	260	82	8	10
Adult Females Total				
F 19-34	530	73	7	21
F 35-54	900	82	6	11
F 55-64	300	83	7	10
Annual Family Income^c				
up to \$25,573	570	37	17	46
\$25,574 - \$51,145	750	73	6	21
\$51,146 - \$90,018	930	86	3	11
\$90,019+	1,120	90	2	7
Family Poverty Level^d				
Poor (<=100%)	240	26	27	48
Near Poor (101% to 200%)	400	46	10	44
Low Moderate (201% to 300%)	410	69	6	25
Mid Moderate (301% to 400%)	460	79	6	15
High Moderate (401% to 600%)	740	89	2	9
High (601%+)	1,120	91	2	6
Parent Status^h				
Married Parent	1,050	87	3	10
Single Parent	230	67	11	21
Married Adult, not parent of child	860	83	5	13
Single Female Adult, not parent of child	570	71	9	20
Single Male Adult, not parent of child	670	58	8	34
Family Work Status^e				
1+ Full-time	2,800	81	3	16
Only Part-time or Part-Year	340	64	10	26
Non-workers	230	37	34	29
Highest Educational Level of Adults in Family				
No HS diploma	250	28	14	58
HS grad only	740	64	8	28
Associate degree/some college	790	79	5	16
BA/BS degree	820	86	5	10
Graduate degree	780	91	4	6
Race/Ethnicity^f				
White, non-Hispanic	1,990	83	5	12
Black, non-Hispanic	920	72	8	19
Hispanic (any race)	250	41	2	57
Asian/Other, non-Hispanic	210	73	3	25
Citizenship				
U.S. citizen	2,990	80	6	14
Non-U.S. citizen	390	49	1	50
Health Status				
Excellent	1,160	79	3	18
Very good	1,240	81	3	16
Good	700	72	5	23
Fair/Poor	280	54	29	16

Table 4

Health Insurance Coverage of Nonelderly Adult Workers, 2002-2003

			Percent Distribution by Coverage Type ^{b, k}				
		Workers (in thousands*)	Employment- based: own	Employment- based: relative	Direct- purchase	Medicaid & Other Public	Uninsured
Total - Nonelderly Adult Workers^j		2,810	58	19	5	3	16
Age	19-24	340	31	26	9	5	29
	25-29	270	59	9	4	4	25
	30-34	310	60	14	2	2	21
	35-39	420	57	21	4	4	14
	40-54	1,060	61	21	4	2	12
	55-64	410	69	17	5	2	7
Workers Annual Income^l							
	up to \$20,000	720	24	28	7	6	35
	\$20,001-\$35,802	690	58	18	4	2	17
	\$35,803-\$59,623	700	70	16	4	2	8
	\$59,624+	700	79	13	3	2	3
Family Poverty Level^d							
	Low (<=200%)	380	33	6	7	7	47
	Low Moderate (201% to 300%)	330	56	11	4	4	26
	Mid Moderate (301% to 400%)	410	57	17	7	3	16
	High Moderate (401% to 600%)	660	63	22	5	2	8
	High (601%+)	1,020	64	25	3	2	6
Work Status^m							
	Full Year Worker-FT	2,090	65	15	4	2	15
	Full Year Worker-PT	210	30	38	5	5	21
	Part Year Worker-FT	340	47	22	6	4	21
	Part Year Worker-PT	170	20	45	9	12	14
Business Sector & Size (# Workers)							
	Federal government employee	280	77	12	1	6	4
	State & Local government employee	320	72	19	1	2	5
	Self-employed, firm <10 employees	190	29	27	18	4	21
	Private firm <10 employees	310	29	23	10	3	35
	Private firm 10-24 employees	220	42	24	5	3	26
	Private firm 25-99 employees	350	58	19	2	2	20
	Private firm 100-499 employees	320	63	17	1	2	17
	Private firm 500+ employees	820	64	17	4	3	12
Industryⁿ							
	Public Sector	610	75	16	1	4	4
	Manufacturing, Mining	180	72	11	2	1	14
	Professional Services	730	63	22	5	3	7
	Agriculture, Fishing, Construction	230	40	17	5	1	37
	Retail Trade, Other Services	650	37	23	7	3	30
	All Others	410	59	17	5	2	17
Education							
	No HS diploma	240	30	9	3	3	55
	HS grad only	810	54	17	4	3	22
	Associate degree/some college	680	55	25	6	3	10
	BA/BS degree	610	64	21	5	2	8
	Graduate degree	470	73	17	3	3	4
Race/Ethnicity^f							
	White, non-Hispanic	1,670	58	23	6	3	11
	Black, non-Hispanic	750	64	13	3	4	16
	Hispanic (any race)	210	37	7	2	2	53
	Asian/Other, non-Hispanic	170	50	18	6	3	23
Citizenship							
	U.S. citizen	2,510	59	20	5	3	12
	Non-U.S. citizen	300	42	8	3	1	46

Table 5

Characteristics of the Nonelderly Uninsured, 2002-2003

	Nonelderly (in thousands*)	Nonelderly Percent	Uninsured (in thousands*)	Uninsured Percent	Uninsured Rate
Total - Nonelderly^a	4,850	100	740	100	15
Age					
Children — Total	1,470	30	140	19	9
Adults — Total	3,380	70	600	81	18
Adults 19-24	430	9	140	18	32
Adults 25-29	310	6	90	12	29
Adults 30-34	350	7	80	11	23
Adults 35-39	500	10	80	11	17
Adults 40-54	1,230	25	160	22	13
Adults 55-64	560	11	60	7	10
Gender					
Female	2,450	51	310	42	13
Male	2,400	49	430	58	18
Annual Family Income^c					
up to \$25,573	790	16	310	42	39
\$25,574 - \$51,145	1,080	22	200	26	18
\$51,146 - \$90,018	1,350	28	140	18	10
\$90,019+	1,620	33	100	13	6
Family Poverty Level^d					
Poor (<=100%)	400	8	150	21	39
Near Poor (101% to 200%)	620	13	210	28	34
Low Moderate (201% to 300%)	640	13	130	17	20
Mid Moderate (301% to 400%)	690	14	80	11	12
High Moderate (401% to 600%)	1,050	22	90	12	9
High (601%+)	1,460	30	80	11	6
Family Work Status^e					
3+ Full-time	200	4	40	5	18
2 Full-time	1,330	27	150	20	11
1 Full-time	2,480	51	360	49	15
Only Part-time	120	2	30	3	22
Only Part-year	370	8	70	10	19
Non-workers	340	7	90	13	28
Race/Ethnicity^f					
White, non-Hispanic	2,790	57	270	36	10
Black, non-Hispanic	1,390	29	240	32	17
Hispanic (any race)	350	7	170	23	48
Asian/Other, non-Hispanic	310	6	70	9	22
Citizenship					
U.S. citizen—native	4,170	86	490	66	12
U.S. citizen—naturalized	230	5	40	5	16
Non-U.S. citizen, resident since before 1996	160	3	70	9	41
Non-U.S. citizen, resident since 1996 or later	280	6	150	20	53
Health Status					
Excellent	2,010	41	270	37	14
Very good	1,650	34	240	32	14
Good	890	18	180	25	21
Fair/Poor	300	6	50	6	15

Table 6

Characteristics of Uninsured Children, 2002-2003

	Children (in thousands*)	Children Percent	Uninsured (in thousands*)	Uninsured Percent	Uninsured Rate
Total - Children^g	1,470	100	140	100	9
Age					
0-6	480	33	50	34	10
7-12	490	33	40	27	7
13-18	500	34	50	39	11
Annual Family Income^c					
up to \$25,573	220	15	50	36	22
\$25,574 - \$51,145	320	22	40	26	11
\$51,146 - \$90,018	430	29	30	24	8
\$90,019+	500	34	20	14	4
Family Poverty Level^d					
Poor (<=100%)	150	10	40	26	24
Near Poor (101% to 200%)	220	15	30	25	16
Low Moderate (201% to 300%)	230	16	20	17	10
Mid Moderate (301% to 400%)	220	15	10	9	6
High Moderate (401% to 600%)	310	21	20	16	7
High (601%+)	330	23	10	6	2
Child Status^h					
Child with 2 parents	1,000	68	50	39	5
Child with 1 parent	390	26	50	36	13
Child without parents	80	6	30	25	41
Family Work Status^e					
1+ Full-time	1,210	82	100	75	8
Only Part-time or Part-year	150	10	10	6	6
Non-workers	110	7	30	19	24
Highest Educational Level of Adults in Family					
No HS diploma	80	6	20	15	24
HS grad only	320	22	50	40	17
Associate degree/some college	350	24	30	21	8
BA/BS degree	370	25	20	12	4
Graduate degree	340	23	20	12	5
Race/Ethnicity^f					
White, non-Hispanic	800	54	40	26	4
Black, non-Hispanic	470	32	60	45	13
Hispanic (any race)	100	7	20	18	24
Asian/Other, non-Hispanic	100	7	20	11	15
Citizenship					
U.S. citizen	1,410	96	110	82	8
Non-U.S. citizen	60	4	20	18	41
Health Status					
Excellent	850	58	70	51	8
Very good	410	28	40	32	11
Good	190	13	20	16	11
Fair/Poor	30	2	0	1	ns

Table 7

Characteristics of Uninsured Nonelderly Adults, 2002-2003

	Nonelderly Adults (in thousands*)	Nonelderly Adults Percent	Uninsured (in thousands*)	Uninsured Percent	Uninsured Rate
Total - Nonelderly Adultsⁱ	3,380	100	600	100	18
Gender/Age					
Adult Males Total					
M 19-34	550	34	190	54	35
M 35-54	830	51	140	39	17
M 55-64	260	16	30	7	10
Adult Females Total					
F 19-34	530	31	110	45	21
F 35-54	900	52	100	43	11
F 55-64	300	17	30	12	10
Annual Family Income^c					
up to \$25,573	570	17	260	43	46
\$25,574 - \$51,145	750	22	160	26	21
\$51,146 - \$90,018	930	28	100	17	11
\$90,019+	1,120	33	80	13	7
Family Poverty Level^d					
Poor (<=100%)	240	7	120	19	48
Near Poor (101% to 200%)	400	12	170	29	44
Low Moderate (201% to 300%)	410	12	100	17	25
Mid Moderate (301% to 400%)	460	14	70	11	15
High Moderate (401% to 600%)	740	22	70	12	9
High (601%+)	1,120	33	70	12	6
Parent Status^h					
Married Parent	1,050	31	100	17	10
Single Parent	230	7	50	8	21
Married Adult, not parent of child	860	25	110	18	13
Single Female Adult, not parent of child	570	17	110	19	20
Single Male Adult, not parent of child	670	20	230	38	34
Family Work Status^e					
1+ Full-time	2,800	83	450	74	16
Only Part-time or Part-year	340	10	90	15	26
Non-workers	230	7	70	11	29
Highest Educational Level of Adults in Family					
No HS diploma	250	8	150	24	58
HS grad only	740	22	210	34	28
Associate degree/some college	790	23	120	21	16
BA/BS degree	820	24	80	13	10
Graduate degree	780	23	50	7	6
Race/Ethnicity^f					
White, non-Hispanic	1,990	59	230	38	12
Black, non-Hispanic	920	27	180	29	19
Hispanic (any race)	250	7	140	24	57
Asian/Other, non-Hispanic	210	6	50	9	25
Citizenship					
U.S. citizen	2,990	89	410	68	14
Non-U.S. citizen	390	11	190	32	50
Health Status					
Excellent	1,160	34	200	34	18
Very good	1,240	37	190	32	16
Good	700	21	160	27	23
Fair/Poor	280	8	40	7	16

Table 8

Characteristics of Uninsured Nonelderly Adult Workers, 2002-2003

	Workers (in thousands*)	Workers Percent	Uninsured (in thousands*)	Uninsured Percent	Uninsured Rate
Total - Nonelderly Adult Workers^j	2,810	100	450	100	16
Age					
19-24	340	12	100	22	29
25-29	270	10	70	15	25
30-34	310	11	70	15	21
35-39	420	15	60	13	14
40-54	1,060	38	130	28	12
55-64	410	15	30	7	7
Workers Annual Income^l					
up to \$20,000	720	26	250	55	35
\$20,001 - \$35,802	690	24	120	26	17
\$35,803 - \$59,623	700	25	60	13	8
\$59,624+	700	25	20	5	3
Family Poverty Level^d					
Poor (<=100%)	90	3	50	12	57
Near Poor (101% to 200%)	290	10	130	28	44
Low Moderate (201% to 300%)	330	12	90	20	26
Mid Moderate (301% to 400%)	410	15	60	14	16
High Moderate (401% to 600%)	660	24	60	12	8
High (601%+)	1,020	36	60	14	6
Work Status^m					
Full Year Worker-FT	2,090	74	310	69	15
Full Year Worker-PT	210	8	50	10	21
Part Year Worker-FT	340	12	70	16	21
Part Year Worker-PT	170	6	20	5	14
Business Sector & Size (# Workers)					
Federal government employee	280	10	10	2	4
State & Local government employee	320	12	20	4	5
Self-employed, firm <10 employees	190	7	40	9	21
Private firm <10 employees	310	11	110	24	35
Private firm 10-24 employees	220	8	60	13	26
Private firm 25-99 employees	350	12	70	15	20
Private firm 100-499 employees	320	11	50	12	17
Private firm 500+ employees	820	29	100	21	12
Industryⁿ					
Public Sector	610	22	30	6	4
Manufacturing, Mining	180	7	30	6	14
Professional Services	730	26	50	11	7
Agriculture, Fishing, Construction	230	8	80	19	37
Retail Trade, Other Services	650	23	190	43	30
All others	410	15	70	15	17
Education					
No HS diploma	240	9	130	30	55
HS grad only	810	29	180	39	22
Associate degree/some college	680	24	70	16	10
BA/BS degree	610	22	50	11	8
Graduate degree	470	17	20	4	4
Race/Ethnicity^f					
White, non-Hispanic	1,670	60	180	40	11
Black, non-Hispanic	750	27	120	27	16
Hispanic (any race)	210	7	110	24	53
Asian/Other, non-Hispanic	170	6	40	9	23
Citizenship					
U.S. citizen	2,510	89	310	69	12
Non-U.S. citizen	300	11	140	31	46

TABLE ENDNOTES

*All population estimates have been rounded to the nearest ten thousand to account for sampling error. Numbers may not add to totals because of rounding.

The term “family” is defined consistently throughout the report. It is the Census’ Current Population Survey (CPS) definition of “family,” meaning all persons living together who are related by blood, marriage, or adoption. Individuals who do not live with relatives are included as one-person “families.”

a Nonelderly includes all persons under age 65 as of March in the following year, i.e., as of March 2003 for calendar year 2002 data and March 2004 for calendar year 2003 data.

b The survey inquires about all the different types of coverage each person might have had during the year. Consequently, some persons report more than one type of coverage. The coverage groups used throughout this report (except for Figure 2) are created by restricting each person to a single coverage type so that the percentages sum to 100%. The coverage hierarchy used here is the same as that used in *Health Insurance Coverage in America: 2002 Data Update*, published by the Kaiser Commission on Medicaid and the Uninsured. Persons are assigned to Medicaid first, followed in order by: employer-based insurance, other public coverage (Medicare and military health care), and finally, direct-purchase private insurance. Persons who report private insurance without specifying the source are included in the direct-purchase count; military health care includes TRICARE/CHAMPUS, CHAMPVA, and VA care. While the hierarchy simplifies coverage comparisons across sub-populations, the hierarchy percentage understates the total who reported each type of coverage except for Medicaid.

c Annual family income categories correspond to the quartiles for the distribution of family income across all families in Maryland (counting an individual who does not live with relatives as a family) in which there is at least one nonelderly person. 2002

incomes have been inflated to their equivalents in 2003 dollars using <http://www.census.gov/hhes/income/income03/cpiurs.html>

d Family poverty level used in this report is the poverty level assigned by Census, as opposed to the poverty guidelines created by Health and Human Services (HHS) for programs such as Medicaid. Poverty level varies by family size, and the Census version also varies slightly by the age-mix of the family, unlike the HHS poverty levels. The Census poverty levels tend to be slightly above those established by HHS. The 2003 federal poverty level range for a family of three is \$14,393–\$14,824, with \$14,800 the most common value in Maryland’s under-65 population.

e Family work status looks at the employment characteristics of adults age 19 or older (including any elderly workers) in the family who received payment for working during the calendar year. Persons in the part-time/part-year category did not have any full-year, full-time workers in their families. Part-time workers worked less than 35 hours during most of the weeks they worked; part-year workers worked fewer than 50 weeks.

f Race/Ethnicity is a mutually-exclusive, hierarchical variable, with the Hispanic category including all Hispanics regardless of race. Persons in the other race/ethnicity categories are all non-Hispanic. Beginning with the CY2002 data, persons could identify themselves in more than one racial group, whereas previously they had to choose just one. Just 1% of Maryland respondents reported more than one racial group. Persons who reported multiple racial categories are assigned using the following hierarchy: 1) if Hispanic, to Hispanic (any race); 2) if Asian/other, to non-Hispanic Asian/Other; and 3) if Black and White, to non-Hispanic Black.

g Children are under age 19 as of March in the following year, i.e., as of March 2003 for calendar year 2002 data and March 2004 for calendar year 2003 data.

h Children are classified according to the number of parents living in their home at the time of the survey. Parents living away from home (such as those on active military duty) are not included in the parent count. A parent is an adult (age 19+) with a child under age 19 living in the same house, or the adult spouse of a parent.

i Nonelderly adults are ages 19–64 as of March in the following year, i.e., as of March 2003 for calendar year 2002 data and March 2004 for calendar year 2003 data.

j Workers are adults who held a job (of any duration) during the calendar year for which they received payment.

k Employer-based: own indicates the worker obtained coverage through his/her employer; employer-based: relative indicates the coverage was provided through the employer of a relative, most often a spouse.

l Worker’s annual income does not include income from other family members. The income categories correspond to the quartiles for the distribution of annual income across all workers, ages 19–64, in Maryland. 2002 incomes have been inflated to their equivalents in 2003 dollars using <http://www.census.gov/hhes/income/income03/cpiurs.html>

m Full-time (FT) workers worked at least 35 hours during most of the weeks they worked; part-time (PT) workers worked fewer hours. Part-year workers were employed for fewer than 50 weeks of the year.

n The industry breakdown for the private sector matches that used by the Agency for Healthcare Research and Quality in the Medical Expenditure Panel Survey – Insurance Component (MEPS-IC) data for Maryland.



4160 Patterson Avenue
Baltimore, MD 21215

ph: (410) 764-3460

fax: (410) 358-1236

web: www.mhcc.state.md.us